

374th Airlift Wing (PACAF) Yokota AB, Japan Office of the Staff Judge Advocate Power-of-Attorney Worksheet						PRIVACY ACT NOTICE <small>AUTHORITY: 10 USC 8072; EO 9397 PRINCIPAL PURPOSE(S): To assist in the preparation of a power-of-attorney and to collect data on the number of legal services provided. ROUTINE USES: See Principal Purposes. DISCLOSURE IS VOLUNTARY: You are not required to complete this form but your failure to do so may result in your not receiving legal assistance service.</small>					
HAVE YOU VISITED OUR OFFICE AND USED ANY OF OUR SERVICES THIS YEAR (1996)?						YES		NO			
YOUR NAME (LAST, FIRST, MI)				YOUR RANK OR STATUS		YOUR SOCIAL SECURITY NUMBER					
NAME AND RANK OF MILITARY SPONSOR (IF APPLICABLE)				YOU OR YOUR SPONSOR'S UNIT AND ORGANIZATION		DUTY PHONE					
						HOME PHONE					
YOUR CITY AND STATE OF LEGAL RESIDENCE			ARE YOU STATIONED AT YOKOTA AIR BASE <div>YES</div> <div>NO</div>			FULL NAME OF PERSON RECEIVING POWER OF ATTORNEY					
CURRENT ADDRESS OF PERSON RECEIVING POWER OF ATTORNEY						EXPIRATION DATE OF POA - (ONE YEAR MAX FOR GENERAL, 90 DAYS MAX FOR SALE OF VEHICLE)					
TYPE OF POWER-OF-ATTORNEY YOU WISH TO GIVE - (PLEASE CHECK THE ONE YOU WANT)											
	GENERAL										
	SPECIAL - SELLING OF VEHICLE (<i>Include year, make, model, color, style, serial number below</i>)										
	SPECIAL - PURCHASE OF VEHICLE (<i>Include year, make, model, color, style, serial number below</i>)										
	SPECIAL - CHILD CARE (<i>Include child/children's name(s) and date of birth below</i>)										
	SPECIAL - BANKING (<i>Include name of bank, type of account, and account number below</i>)										
	SPECIAL - HOUSEHOLD GOODS (<i>List specific information below</i>)										
	SPECIAL - ACCEPTANCE OF GOVERNMENT QUARTERS (<i>List specific information below</i>)										
	SPECIAL - OTHER (<i>List specific information below</i>)										
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										PREPARED BY	